UMass Contingency Report

June 4, 2015



Brief Summary of Contingency Projects

UMass

- Third Party Liability- The primary goal of this project is to identify other insurers including commercial health insurers and Medicare to cover the cost of providing health care to MassHealth and HSN members. This also includes estate recoveries, premium assistance, and enhanced coordination of medically-complex Medicaid benefits.
- Program Integrity- EOHHS is required to perform activities that identify potential fraud, waste, and abuse, and to ensure integrity of the Medicaid program. The contract provides surveillance utilization reviews, provider audits, and recovery activities. UMass also processes AG/Medicaid Fraud cases and large global settlements (\$56M projected below). Actuals are trending lower than projections due to fewer large settlements compared with prior
- School Based Claiming- The primary goal of this project is to collect Federal Financial Participation (FFP) for school district spending on direct Medicaid eligible medical services provided to children as prescribed in their Individualized Education Plan (IEP) and on some administrative eligible expenditures.
- Federal Claiming- UMass assists EOHHS with identifying Medicaid expenditures that qualify for federal claiming including Children's Health Insurance Program (CHIP), administrative claiming for Health Services Initiatives (HSI), and Non-Acute Hospital Payment on Account Factor adjustment claiming.
- Public Provider Reimbursement- The purpose of this contract is to maximize reimbursement for the costs for health care and other public services provided by various health and human service agencies including payment rate setting, medical billing, accounts receivable management, and administrative claiming.
- New Initiatives- The purpose of this ISA is to identify and develop new cost avoidance and revenue opportunities for EOHHS. Prospective eligibility review of long-term care applicants (asset verification), Medicare outreach and enrollment, and Medicare missed entitlement are examples of some of our new initiatives.

TABLE 1 Contingency Based Interdepartmental Service Agreements FY2015 Summary July 1,2014 thru December 31, 2014				
Third Party Liability	\$2,698,441,280	\$285,234,497	\$1,853,710,075	\$13,300,000
Program Integrity and Compliance	\$30,500,000	\$56,000,000	\$24,512,056	\$3,030,000
School Based Claiming	\$-	\$66,289,930	\$9,246,190	\$1,825,672
Federal Claiming	\$-	\$34,809,500	\$23,412,576	\$820,224
Public Provider Reimbursement	\$-	\$820,015,000	\$182,967,419	\$10,000,000
New Initiatives	\$66,550,000	\$5,400,000	\$28,648,087	\$4,655,000
Grand Total	\$2,795,491,280	\$1,267,748,927	\$2,122,496,403	\$33,630,896